

CITY OF TITUSVILLE, PA FOOD ESTABLISHMENT INSPECTION REPORT

CITY OF TITUSVILLE DEPARTMENT OF HEALTH		No. of Risk Factor/Interventions Violations		Date 11/6/19	
		No. of Repeat Risk Factor/Intervention/Violations		Current Expiration 12/10/2019	
Establishment YMCA Wellness Center		Location 505 W. Walnut St.		Phone	
License / Permit #	Contact/Permit Holder Kim Ciccarelli	Purpose of Inspection Routine <u> </u> Follow-up <u> </u>	Est Type FS <u> </u> RS <u> </u>	Risk Category High <u> </u> Medium <u> </u> Low <u> </u>	

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Circle designated compliance status (IN, OUT, N/O, N/A) for each numbered item
IN = in compliance **OUT** = not in compliance **N/O** = not observed **N/A** = not applicable
COS = corrected on-site during inspection **R** = repeat violation

Compliance Status		COS	R	Compliance Status		COS	R
Demonstration of Knowledge							
1	IN OUT			16	IN OUT N/A N/O		
Certification by accredited program, compliance with Code, or correct responses				17	IN OUT N/A N/O		
Employee Health							
2	IN OUT			18	IN OUT N/A N/O		
Management awareness; policy present				19	IN OUT N/A N/O		
3	IN OUT			20	IN OUT N/A		
Proper use of reporting, restriction & exclusion				21	IN OUT N/A N/O		
Good Hygienic Practices							
4	IN OUT N/O			22	IN OUT N/A N/O		
Proper eating, tasting, drinking, or tobacco use							
5	IN OUT N/O						
No discharge from eyes, nose, and mouth							
Preventing Contamination by Hands							
6	IN OUT N/O			23	IN OUT N/A		
Hands clean & properly washed							
7	IN OUT N/A N/O			Highly Susceptible Populations			
No bare hand contact with RTE foods or approved alternate method properly followed				24	IN OUT N/A		
8	IN OUT			Pasteurized foods used; prohibited foods not offered			
Adequate handwashing facilities supplied & accessible							
Approved Sources							
9	IN <u>OUT</u>		X	25	IN OUT N/A		
Food obtained from approved source							
10	IN OUT N/A N/O			26	IN OUT N/A		
Food received at proper temperature							
11	IN OUT			Conformance with Approved Procedures			
Food in good condition, safe & unadulterated				27	IN OUT N/A		
12	IN OUT N/A N/O			Compliance with variance, specialized process, & HACCP plan			
Required records available: shelf stock tags, parasite destruction							
Protection from contamination							
13	IN OUT N/A			Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illness or injury.			
Food separated & protected							
14	IN OUT N/A						
Food-contact surfaces: cleaned & sanitized							
15	IN OUT						
Proper disposition of returned, previously served, reconditioned & unsafe food							

GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals and physical objects into foods.
 Mark "X" in box if numbered item is not in compliance Mark "X" in appropriate box for COS and/or R COS=corrected on-site during inspection R=repeat violation

		COS	R			COS	R
Safe Food and Water							
28	Pasteurized eggs used where required			41	In-use utensils: properly stored		
29	Water & ice from approved source			42	Utensils, equip & linens: properly stored, dried & handled		
30	Variance obtained for specialized processing methods			43	Single-use & single-service articles: properly stored & used		
Food Temperature Control							
31	Proper cooling methods used; adequate equipment for temperature control			44	Gloves used properly		
Utensils, Equipment and Vending							
32	Plant food properly cooled for hot holding			45	Food & non-food contact surfaces cleanable, properly designed, constructed & used		
33	Approved thawing methods used			46	Warewashing facilities: installed, maintained, used: test strips		
34	Thermometers provided & accurate			47	Non-food contact surfaces clean		
Food Identification							
35	Food properly labeled; original container			48	Hot & cold water available; adequate pressure		
Prevention of Food Contamination							
36	Insects, rodents & animals not present; no unauthorized persons			49	Plumbing installed; proper backflow devices		
37	Contamination prevented during prep, storage & display			50	Sewage & waste water properly disposed		
38	Personal cleanliness			51	Toilet facilities: properly constructed, supplied & cleaned		
39	Wiping cloths: properly used & stored			52	Garbage & refuse properly disposed; facilities maintained		
40	Washing fruits & vegetables			53	Physical facilities installed, maintained & clean		
				54	Adequate ventilator & lighting: designated areas used		

 Person in Charge (Signature) 

 Inspector (Signature) 

 Follow-up: YES NO (Circle one)

Follow-up Date: _____

APPROVED

NEW

RE-NEW

RE-INSPECT

